



# APPLICATION FOR WILD ANIMAL PERMIT

State Form 2402 (R9/6-07)

Approved by State Board of Accounts 2007

## DEPARTMENT OF NATURAL RESOURCES

Division of Fish and Wildlife  
402 W. Washington Street, Room W273  
Indianapolis, IN 46204-2781  
Telephone: (317) 233-6527  
Fax Number: (317) 232-8150

### Instructions:

1. Please type or print information.
2. Be sure to read all regulations.
3. Attach additional sheets for explanation if necessary.
4. Mail form and permit fee (if applicable) to the above address.

☐ New Applicant (FEE: \$10.00 – Make check or money order payable to the Division of Fish & Wildlife)

☐ Renewal (NO FEE) Original permit number (For Renewals) \_\_\_\_\_ Year issued \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
(Last Name, First Name, Middle Initial)

Date of Birth \_\_\_\_\_ Indiana Driver's License Number \_\_\_\_\_

Address (Number and Street or Rural Route, No PO Boxes) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

County \_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_

### ANIMAL INFORMATION - (One animal per application)

Species of animal \_\_\_\_\_ Check all that apply: ☐ Male ☐ Female ☐ Neutered ☐ Spayed

Location of animal (Number and Street) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_ County \_\_\_\_\_

**Complete the following section if this is the first application to possess the animal.**

**You may skip this section if this is a renewal application.**

Name of person or organization animal obtained from \_\_\_\_\_

Address of person or organization animal obtained from \_\_\_\_\_

How Obtained: ☐ Purchase ☐ Gift ☐ Other (Explain) \_\_\_\_\_ Date Obtained (M/D/Y) \_\_\_\_\_

Purpose for keeping above mentioned animal \_\_\_\_\_

### SIGNED STATEMENT OF VETERINARIAN (D.V.M.)

I, \_\_\_\_\_, verify that the animal listed on this application form appears to be free of disease, properly immunized and in good health. I further verify, in the case of a renewal application, that the animal:

1. Was observed at least once during the prior year or more frequently if necessary to provide adequate veterinarian care. Frequency of the visits was determined by attending veterinarian, not the facility.
2. Appears to have been properly cared for in the following other areas of animal husbandry:
  - (a) Appropriate facilities, personnel and equipment for pest control, sanitation, quarantine, capture and restraint, and medical observation.
  - (b) Appropriate handling, tranquilizing, and euthanasia were provided under veterinarian guidance.
  - (c) Nutrition and diets.

Veterinarian's comments (use additional sheets if necessary): \_\_\_\_\_

Signature of Licensed Veterinarian \_\_\_\_\_ Date \_\_\_\_\_

Name of Business \_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_

Address of Business (Number and Street, City, State, ZIP code) \_\_\_\_\_

### **RECAPTURE PLAN**

Every application must provide a recapture plan. This must include a plan for the quick and safe recapture of the wild animal if the animal escapes or, if recapture is impracticable, for the destruction of the animal. You must obtain the equipment needed to carry out the recapture and destruction plan. The nature and extent of the recapture plan and the equipment needed are dependent on the danger the escaped animal poses to persons, domestic animals, livestock, and other wildlife in the vicinity of the escape.

1. Please list the names and phone numbers of people who will be notified if the animal escapes (police, neighbors, etc.):

#### **Contact**

#### **Phone Number**

DNR Conservation Officer: \_\_\_\_\_

\_\_\_\_\_

Local Police: \_\_\_\_\_

\_\_\_\_\_

Neighbor: \_\_\_\_\_

\_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

2. Please list the name(s) of people who will attempt to recapture the animal:

#### **Name**

#### **Phone Number**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Please list the equipment (live trap, ropes, cages, tranquilizer gun, etc.) that you possess that will be used to recapture the animal and, if impracticable, provide for the destruction of the animal. For Class III wild animals (tigers, cougars, bears, etc.), you must have equipment on hand that will not only provide for the quick and safe recapture of the animal, but also equipment that can be used to kill the animal if it escapes outside the perimeter fence and isn't able to be recaptured.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **AGREEMENT**

Under the penalties of perjury (IC 35-44-2-1), I certify that the information supplied by me is true and correct to the best of my knowledge.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Please return application form and check or money order (if applicable) made payable to the Division of Fish and Wildlife to the following address:**

Permit Coordinator  
Division of Fish and Wildlife  
402 W. Washington Street, Room W273  
Indianapolis, IN 46204

### **FOR OFFICE USE ONLY**

Issue Date: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Check Number: \_\_\_\_\_

Approved by: \_\_\_\_\_ Approval Date: \_\_\_\_\_ Comments: \_\_\_\_\_